



# **BOARD OF LICENSE COMMISSIONERS**

**City Hall, 718 Main Street**

**Fitchburg MA 01420**

**(978) 829-1820**

**Nancy A. Maynard, Chairman**

**Daniel Sarefield**

**Vincent Pusateri, II**

## **APPLICATION FOR STUDENT HOUSING IN THE STUDENT HOUSING OVERLAY DISTRICT**

The License Commission makes two distinct findings in the process of determining whether to grant or deny a license to operate a Student Housing facility in the Student Housing Overlay District. At its first meeting following the submission of the complete application and required documents, the Commission first determines the suitability and character of the applicant and the applicant's history, if any, in managing similar properties. In the second phase, the Commission also determines whether the physical facilities are adequate. It relies on the plans submitted by the applicant and the determinations of the Building Commissioner, the Fire Prevention Bureau, the Police Department, the Planning Board and the Director of Public Health, and such other departments which it deems appropriate to seek comment from. Under the zoning ordinance the applicant must separately apply for a special permit from the Planning Board. (It is recommended that the suppliant first obtain the License Commission's approval as to suitability and character of the applicant prior to filing for the special permit).

In addition to this application the Applicant must file the following:

- 1: Signed authorization to release CORI records
- 2: Certificate of Good Standing issued by the Secretary of the State (if the applicant is a corporation)
- 3: Certificate of Tax Compliance
- 4: Zoning Determination letter from the Building Commissioner

Date: \_\_\_\_\_

The undersigned hereby makes an initial application for a Student Housing License:

### THE APPLICANT

1. Name of Applicant \_\_\_\_\_
2. Business name, if different from above: \_\_\_\_\_ (full corporate name if applicant is a corporation/names of every partner if applicant is a partnership)
3. Applicant's address: \_\_\_\_\_
4. Applicant's Telephone Number: \_\_\_\_\_
5. Applicant's E-mail Address: \_\_\_\_\_
6. Full Legal Name of Property Owner \_\_\_\_\_
7. By what right does the applicant have possession of the property? \_\_\_\_ (owns) \_\_\_\_ (manages)
8. If managing, please provide name of owner \_\_\_\_\_
9. If applicant is not an individual person but rather an entity, describe and the kind of entity (corporation, LLC, LLP, Trust) \_\_\_\_\_
10. Please attach copies of articles of incorporation/organization or real estate trust
11. List all of the individual person involved with the entity and their addresses
12. Does the applicant or any person with a direct or indirect beneficial interest in the license have any other licenses from the Commonwealth or any municipality within the Commonwealth of Massachusetts? If so please list every one of them and the name(s) of issuing agency  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
13. Has the applicant or any person with a direct and beneficial interest in this license ever been subject to discipline, suspension or revocation of a Lodging or Student Housing license issued to him or her?
14. Has the applicant or any person with a direct and beneficial interest in this license ever been convicted of a municipal, state, federal or military crime?
15. Has the applicant ever owned or managed a Student Housing facility?
16. If the answer to question 15 is yes, please list the address(es) of each  
\_\_\_\_\_  
\_\_\_\_\_

17. List the address(es) of all multi-family (two or more rental units) properties which the applicant has owned or managed:

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### THE PREMISES

18. Address of proposed Student Housing Facility \_\_\_\_\_
19. Name of Student Housing Facility, if any \_\_\_\_\_
20. Description of the premises, including description of the facilities for students  
\_\_\_\_\_
21. Number of floors \_\_\_\_\_
22. Number of rooms: Basement \_\_\_ First \_\_\_ Second \_\_\_ Third \_\_\_ Fourth \_\_\_ Fifth \_\_\_ Other  
floors \_\_\_\_\_: total rooms \_\_\_\_\_
23. Number of students that can be accommodated \_\_\_\_\_

### License Manager Information

24. Full Legal name and home address(es) of the proposed manager(s) or person to be in charge of the premises:

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25. Telephones numbers – give both home telephone and number where you can be reached day or night: \_\_\_\_\_

26. Employment for the last ten (10) years:

<u>DATES:</u>	<u>EMPLOYER</u>	<u>ADDRESS</u>
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_____	_____	_____
_____	_____	_____
_____	_____	_____

27. Has the proposed manager ever been subject to discipline, suspension or revocation of any license for which he/she served as manager? \_\_\_\_\_

28. Has the proposed manager ever been convicted of any municipal, state, federal or military crime?

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29. Has the proposed manager previously managed a student housing facility or had similar experience?

Describe past experience:

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30. Hours per week to be spent on the licensed premises: \_\_\_\_\_

### **RESIDENT AGENT INFORMATION**

31. Full legal name and home address(es) of the proposed resident agent(s) or person to be in charge of the premises (if applicable: name & addresses of resident assistants):

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32. The applicant has contacted the Fitchburg Police Department and the Fitchburg Fire Department and has made the following arrangements to permit the Departments with emergency access:

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- I understand that the Commission is permitted to see my Criminal Offender Record Information (CORI) and will do so as part of this application process. The Commission will review and use my CORI in determining whether it will issue a license to me.

33. The license, if granted, is personal to the applicant and the approved manager and any change in the ownership or management requires a transfer application.

34. The license, when initially granted, shall be in effect for the current license year (August 1 – July 31) and subject to renewal annually. Within 30 days of occupancy, the approved licensee shall supply a list of residents' names, telephone numbers and the name of the school attending. Thereafter, the residents list must be updated twice a year on or about September 15<sup>th</sup> and February 15<sup>th</sup>.

35. The license for a Student Housing Facility in the Student Housing Overlay District is a two part process. After the License Commission makes a determination that the applicant and proposed manager are approved, the applicant must obtain approval from the Planning Board for a special

permit and site plan review, and an occupancy permit and certificate of inspection from the Building Commissioner before final License Commission approval can be obtained.

36. Pursuant to G.L.c. 62C, Sec 49A, under the pains and penalties of perjury, I, the applicant, certify that I (it has) have complied with all laws of the Commonwealth relating to taxes, reporting of employees and contractors, and withholding and remitting of child support. I (it has) have filed all state tax returns, paid all state taxes. The applicant also understands that each representation made in this application is material to the determination whether the license shall be issued and state under the pains and penalties of law that all the statements made in the application are true.

Applicant's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Proposed Manager's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

(As adopted April 18, 2012)